Request for Audiovisual Production (Part 1)			Date:	Desired Completion Date:	
				Project No.:	
Requester:	Office Symbol:		Bldg. No.:	Phone No.:	
Point of Contact:	Office Symbol:		Bldg. No.:	Phone No.:	
Motion Picture Video Sound	Silent	Color	Black and White Length:		
Purpose of Production:					
Brief Outline:					
To a Charles of a Militab Dandard and a lateral and					
Type of Audience for Which Production is Intended:					
Distribution of Film/Tape (Who? Where? How many?):					
,,,					
Remarks (Include any special items or requirements in this	section):				
Approvals				Estimated Cost:	
Signature of Office/Lab Director:			Date:		
Signature of AA/ Poord Approval.			Date:	Fund Source:	
Signature of A/V Board Approval:			Date:		

Request for Audiovisual Production Production Cost Estimate (Part 2) (To be completed by production source)		Date:	Desir	Desired Completion Date: Project No.:			
			Proje				
		Funding Source:	Production to be done by: MSFC Audio/Visual Service				
			Other (Specify):				
		Labor Estimate					
Item Number	Description		Labor Hours	Unit Cost	In- House	Out-of- House	
	Script Development:						
	Production:						
	Other:						
		Pre-Script Sub Total					
Producer:		Phone Number:	10% Add On				
		Date:	Estimated Total Not to Exceed				